## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

TRIND/1117

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			7			• •		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		·	BASIC FEE	<del> </del>	OR	BASIC FEE	<del></del>
TOTAL CHARGEABLE CLAIMS			7 minus 20=		• 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		/			X43=	43	OR	X86=	
MU	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 11	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2		TOTAL	428	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							• .					THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ·		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	PENIDENT	CLAIM	=		X43=		OR	X86=	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							_ A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	·	(Column 1)		(Colum		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	i	HIGHE NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	•	OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									,		
	•						L	+145=		OR	+290=	2 4
		•	•				A	TOTAL DDIT, FEE	·	OR	TOTAL ODIT. FEEL	
		(Column 1)	,	(Colum		(Column 3)	1					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		ا ہے	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
. 14	the esteric selec-	ma 1 ia lasa than it					L	+145= TOTAL		OR	+290=	
** t	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
1	he "Highest Num	mber Previously Paid ber Previously Paid	For" (Total or	Independer	iess than nt) is the l	i 3, enter "3." highest number		DIT. FEE L	opriate box			